



TCORS  
43 BROAD ST  
NEW LONDON, CT  
06320  
860.447.0335

## SPECIAL POINTS OF INTEREST:

- Steps to Prepare for Complying with the Final 60 Day Rule.
- About the TCORS Medicaid Audit Group.

## NEXT NEWSLETTER

- We will discuss how to respond to a DSS audit.

To view our past newsletters, visit us at [www.tcors.com](http://www.tcors.com) Medicaid Audit Services

## 60 DAY RULE FOR OVERPAYMENTS

### Part II

This newsletter is the second of two parts. In Part I, we provided you a review of the key provisions of the “60 Day Rule” and its relevance to Medicaid providers.

This part will discuss how to prepare for the Rule.

### Steps to Prepare for Complying with the Final 60 Day Rule

- Review your overpayment policy and if necessary revise it to comply with the final 60 Day Rule. If your entity does not have an overpayment policy one should be developed that complies with the rule.
- Review your Document Retention policies, ensure that they cover the new 6-year look back period. Of course if current state record retention regulations require a longer retention period for your type of provider category than compliance with that state standard must continue.
- Have written guidelines or policies establishing processes for conducting internal reviews and/or investigations when a suspected overpayment is identified. Incorporate the process, timing, and reporting expectations.

- Provide training to employees on the final rule
  - ◇ Employees involved in the process of identifying and refunding overpayments should receive updated/supplemental training on the Final Rule and changes to overpayment policies.
    - \* Accounting Department
    - \* Audit Department
    - \* Administrative staff
    - \* Compliance Department
    - \* Legal Department
  - ◇ Certain employees should receive updated/supplemental training on any changes to document retention polices
    - \* Records Department
    - \* IT Staff
  - ◇ Certain employees should receive updated/supplemental training on changes to your internal investigation processes.
    - \* Compliance Department
    - \* Legal Department
    - \* Audit Department
  - ◇ Incorporate a review of the requirement to return identified overpayments and the Final Rule into your annual employee compliance training
    - \* Final Rule states that the organization is responsible if employee or agent at any level has knowledge of an overpayment.
- Conduct regular internal or external billing audits.

A formal Compliance Plan is critical for every practice and it should be reviewed on an annual basis to ensure that it is current with new laws. A good compliance plan addresses overpayments, credit balances and other claims-related errors.

Because there isn't a final regulation pertaining to Medicaid overpayments, the jury is still out on all the nuances of what constitutes an overpayment. The spectrum can range from clear instances where a service was not delivered at all to where a service was delivered, but a file was not properly documented. Each case needs to be reviewed separately.

## About the TCORS Medicaid Group

Our Medicaid Audit Department is comprised of Attorney Robert D. Tobin, partner; Attorney Joseph J. Selinger, partner; James Wietrak, former DSS Director of Quality Assurance; and Denise Smith, Certified Professional Coder and Medical Auditor. They are prepared to conduct Medicaid compliance reviews or “mock audits” of a number of Medicaid providers to identify areas of potential weakness and recommended corrective actions. Both Jim and Denise have extensive knowledge of the requirements governing various types of healthcare providers and continuously keep informed as to the ongoing audits and proposed rules affecting Connecticut’s providers.

### JAMES WIETRAK



Prior to joining the firm as a Director of Medicaid Audit Services, Mr. Wietrak was the Acting Deputy Commissioner of the Department of Social Services. As such he was responsible for the operations of the Department of Social Services Bureau of Administration. From 1993 to 2009, Mr. Wietrak was the Director of Quality Assurance. He directed audits of Medicaid providers, directed recipient and provider fraud prevention and detection activities. He served as Project Manager for the department’s Data Warehouse and Decision Support System and directed third party liability and asset recovery projects that resulted in recovery and cost avoidance of \$190 million annually. Additionally, he directed quality control reviews of Medicaid, Food Stamps and other federally funded assistance programs. From 1984 to 1993, Mr. Wietrak managed audits of Medicaid providers, managed fraud prevention and detection activities and managed audits of the General Assistance Program.

### DENISE SMITH

Prior to joining the firm, Denise worked at L&M Medical Group as the Coding and Compliance Coordinator. She was responsible for conducting medical record documentation audits, overseeing the payor audits and supplying education and feedback to her billing staff and providers. Denise was also a member of the ICD-10 implementation core team, which was responsible for overseeing both provider and coder education for ICD-10. Denise earned her coding certificate through Penn Foster Career School. She has studied through the American Academy of Professional Coders and has earned three coding credentials: CPC (Certified Professional Coder), CPMA (Certified Professional Medical Auditor) and CEMC (Certified Evaluation and Management Coder). Denise also participated in a train the trainer program for ICD-10 implementation.



# TCORS

43 Broad Street  
P.O. Box 58  
New London, CT 06320

330 Main St, 3rd Fl  
Hartford, CT 06106

Phone: 860-447-0335  
Fax: 860-444-6710  
E-mail: [jwietrak@tcors.com](mailto:jwietrak@tcors.com)  
Email: [dsmith@tcors.com](mailto:dsmith@tcors.com)  
Website: [www.tcors.com](http://www.tcors.com)



## TCORS MEDICAID AUDIT SERVICES

- **Educational Seminars**  
We help you understand the DSS Medicaid audit process, and proper billing, coding and documentation procedures.
- **Periodic Record Reviews**  
We replicate an actual Medicaid audit to determine your organization's compliance weaknesses that could save you from costly financial disallowances and extrapolated audit adjustments.
- **Assistance During the Audit Process**  
We assist your organization in developing defenses in response to any draft and/or final audit reports and in negotiating settlements.
- **Appeal Audit Decisions**  
We will represent you throughout the entire appeal process

Contact Us To Set Up A Personalized Meeting

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New London, CT 06320